

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/555113.

FILING DATE

26 JAN 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		2		/		
4		/		/		
5		/		/		
6		0		/		
7		0		/		
8		0		/		
9		0		/		
10		0		/		
11		0		/		
12		0		/		
13		0		/		
14		0		/		
15		0		/		
16		0		/		
17	/		/			
18		/		/		
19		0		/		
20		0		/		
21		0		/		
22		0		/		
23		0		/		
24		0		/		
25		0		/		
26		0		/		
27		0		/		
28		0		/		
29	/		/			
30		/		/		
31		2		/		
32		2		/		
33		0		/		
34		0		/		
35		0		/		
36		0		/		
37		0		/		
38		0		/		
39		0		/		
40		0		/		
41		0		/		
42		0		/		
43		0		/		
44		0		/		
45		0		/		
46		0		/		
47		0		/		
48		0		/		
49		0		/		
50		0		/		
TOTAL IND.	5	↓	5	↓		↓
TOTAL DEP.	97	←	92	←		←
TOTAL CLAIMS	102		97			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	/		/			
52		/		/		
53		2		/		
54		2		/		
55		0		/		
56		0		/		
57		0		/		
58		0		/		
59		0		/		
60		0		/		
61		0		/		
62		0		/		
63		0		/		
64		0		/		
65		0		/		
66		0		/		
67		0		/		
68		0		/		
69		0		/		
70		0		/		
71	/		/			
72		0		/		
73		0		/		
74		0		/		
75		0		/		
76		0		/		
77		0		/		
78		0		/		
79		0		/		
80		0		/		
81		0		/		
82		0		/		
83		0		/		
84		0		/		
85		0		/		
86		0		/		
87		0		/		
88		0		/		
89		0		/		
90		0		/		
91		0		/		
92		0		/		
93		0		/		
94		0		/		
95		0		/		
96		0		/		
97		0		/		
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						